

RANITIDINE REGISTERS 200 MILLION TREATMENTS

Glaxo reports that its H_2 -receptor antagonist ranitidine is one of the most widely prescribed medications in the world, registering 200 million patient treatments of at least 30 days' duration since its introduction in 1981. Introduced in Canada in 1982, ranitidine heals more than 80% of duodenal ulcers and is an effective maintenance therapy that prevents ulcer recurrence and potentially fatal hemorrhaging from ulcer sites. The drug has prevented many hospital stays, because surgery used to be the only long-term solution for many patients.

ONTARIO TREATING MORE SUBSTANCE-ABUSE PATIENTS AT HOME

The number of Ontarians heading to US substance-abuse treatment centres has fallen almost 90% since the Drug and Alcohol Registry of Treatment (DART) opened in 1991, according to the *Journal* of the Addiction Research Foundation. DART screens all out-of-country requests for substance-abuse treatment and informs professionals and the public where treatment is available in Ontario.

The number of Ontario Health Insurance Plan (OHIP) claimants in US treatment centres fell from a peak of 4369 in 1990-91 to 405 in 1993-94; the cost to OHIP dropped from \$50 million to \$2.7 million during the same period. In most cases,

Ontarians can be treated in one of the province's 228 drug- or alcohol-treatment centres. US centres may still be approved for specialized services, such as treatment for the deaf, but only after screening by DART.

SUNNYBROOK RESEARCH HITS \$22.3 MILLION

Research at Sunnybrook Health Science Centre in North York, Ont., has grown to a \$22.3-million operation in just 5 years, according to the recently published *Sunnybrook Research Report 1989-94*. Most of the funds come from external grants, although researchers also receive about \$5 million a year from individual and corporate donations.

Sunnybrook collaborates with the University of Toronto, other research centres, industry and government to focus on research in seven areas: cancer, aging, imaging, trauma, clinical epidemiology, general research and clinical pharmacology.

POPULATION HEALTH DOCUMENT RELEASED

Population health has joined the public policy agenda with the release of a discussion paper, *Strategies for Population Health: Investing in the Health of Canadians*, by the provincial/territorial health ministers. In a news release, federal Health Minister Diane Marleau stated that "the document provides an excellent framework for ac-

tion that is based on sound evidence about the major determinants of health. It provides a solid basis for partners in many sectors to set priorities and establish strategies to improve the health of Canadians."

British Columbia Health Minister Paul Ramsey, who chairs the conference of ministers of health, also commented: "There must be a balanced emphasis on, and an investment in, all of the determinants of health, with health system reform only one key component." Copies of the paper are available from provincial/territorial departments of health or from Publications, Health Canada, Ottawa, ON K1A 0K9; 613 952-9191.

PATIENT BEHAVIOUR TRACED TO HOLOCAUST

Staff at the Baycrest Centre for Geriatric Care are beginning to understand that some of their elderly patients' difficult behaviour may be traced back to the Holocaust. The February issue of *Baycrest Bulletin* cites the case of an elderly woman who screams and lashes out every time a nurse tries to take her for a shower. The newsletter says the behaviour may have been triggered by experiences in Nazi concentration camps, where showers were often used to gas prisoners. Because all care teams surveyed in the Jewish Home for the Aged and the hospital are caring for Holocaust survivors, Baycrest is developing appropriate education and training for staff that will help them deal with these special needs.

EVERY PICTURE TELLS A STORY

An art exhibition that unites female visual artists with breast-cancer survivors has begun a national tour at Toronto's Royal Ontario Museum. Inspired by the stories of breast-cancer survivors, 24 Canadian artists created works of art in different media to represent the women who have or will develop breast cancer.

The exhibit, commissioned by the Woodlawn Arts Foundation, will be in Toronto until May 22 before moving to the Stratford Gallery in Stratford, Ont., for the June-to-September theatre season. Future dates and locations are: Nov. 11-Jan. 1, 1996, Art Gallery of Nova Scotia, Halifax; Jan. 15-Feb. 25, 1996, MacKenzie Art Gallery, Regina; Mar. 20-May 26, 1996, Vancouver Art Gallery; June 16-Aug. 25, 1996, Winnipeg Art Gallery; and Sept. 14-Dec. 7, 1996, Glenbow Art Gallery, Calgary.

CMA THROWS SUPPORT BEHIND OBJECTIVES OF FIREARMS LEGISLATION

The CMA says it supports the objectives of the federal government's controversial firearms legislation, which was introduced in the House of Commons Feb. 14. A key part of the proposed law calls for the mandatory registration of all firearms. That move is facing stiff opposition, particularly in Western Canada.

"While we recognize that there is a place for the legitimate use of firearms in hunting and collecting, we intend to review the legislation to ensure that it addresses the problem of violence in society and helps to reduce the morbidity and mortality caused by inappropriate firearms use," said Dr. Bruno L'Heureux, the president. Like many other CMA members, he said, he has had to treat patients in his office and at the

local emergency room whose injuries showed the devastating results of violence. "It is a sobering experience that brings the issue into sharp focus," he said. "Any reasonable measure to address this problem effectively must be considered."

QMA SUPPORTS TOUGH GUN CONTROL

Dr. Edwin Coffey, president of the Quebec Medical Association (QMA), has written federal Justice Minister Allan Rock to express his association's support for stricter firearms legislation. In his letter, cited in the *QMA Express*, Coffey said: "Quebec doctors, like those in all regions of the country, regularly have to deal in their practices with the tragic consequences of gun use or any other form of violence: death, physical and psychological trauma, not to mention the deterioration in the social climate. Since guns are responsible . . . for approximately 1400 deaths per year in this country, we are totally in favour of stricter legislation that will better control the ownership and circulation of guns and thus result in a major reduction in the number of injuries and deaths caused by their use."

GUN CONTROL NOT ONLY SOLUTION TO VIOLENCE: EDITORIAL

An editorial in the December 1994 edition of the *Western Journal of Medicine* praised organizations representing American physicians for their strong support of efforts to curb firearm-related violence, but warned that gun control alone will not cure the epidemic of violence in the US. However, it would also be naïve to forget that firearms magnify the consequences of interpersonal vio-

lence, said Dr. Arthur Kellermann of Emory University in Atlanta, Georgia. He was commenting on strategies to reduce firearm-related violence by restricting access to guns or modifying aspects of their designs.

Kellermann cited data showing that the fatality rate for assaults with a gun is two to five times higher than the rate for knife assaults. However, he said two things must be present for firearm-related violence to occur — violence and immediate access to a gun — and the challenge is to keep the two separate as much as possible. It is ridiculous, he said, to encourage people to keep guns in their homes for personal protection without a clear understanding of the balance of the benefits and risks. He said it is also foolish to let prior offenders, who through plea-bargaining have had charges reduced to misdemeanours, purchase weapons.

UN OUVRAGE SUR LA SANTÉ DES FEMMES

La Fédération des médecins omnipraticiens du Québec et les éditions Édisem/Maloiné viennent de publier un ouvrage intitulé «La Santé des femmes» qui décrit les différents aspects de la santé des femmes de la puberté jusqu'à l'âge adulte. L'ouvrage écrit par 89 auteurs, sous la direction des docteurs Huguette Bélanger et Louise Charbonneau, aborde les problèmes et maladies qui affectent les femmes selon leur âge, du point de vue biologique, psychologique et sociologique.

Ce document se veut un outil pédagogique destiné aux professionnels de la santé et des services sociaux et un instrument de référence pour les intervenants engagés dans la pratique clinique. Ce livre est disponible en français seulement et on peut le se procurer chez Somabec, BP 295, 2475, Sylva Clapin, Saint-Hyacinthe (Québec) J2S 7B6; tél: 514 467-8565.